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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	221612001002
	First Inventor	Scott K. PALM
	Title	PERLITE PRODUCTS WITH CONTROLLED PARTICLE SIZE DISTRIBUTION
	Express Mail Label No.	EV336627807US

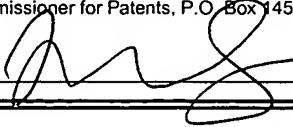
<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing) (original + 1 copy for fee processing (2 pages total))</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>	8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification <span style="border: 1px solid black; padding: 2px;">[Total Pages 36]</span>	a. <input type="checkbox"/> Computer Readable Form (CRF)
<i>(preferred arrangement set forth below)</i>	
<ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="border: 1px solid black; padding: 2px;">[Total Sheets 1]</span>	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
5. Oath or Declaration <span style="border: 1px solid black; padding: 2px;">[Total Sheets 2]</span>	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney
a. <input type="checkbox"/> Newly executed (original or copy)	
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i>	
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</i>	
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 (3 Pages)	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:	
<input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <span style="border: 1px solid black; padding: 2px;">10/268,573</span>	
<i>Prior application information: Examiner</i> <span style="border: 1px solid black; padding: 2px;">D. Brunsman</span> <i>Art Unit:</i> <span style="border: 1px solid black; padding: 2px;">1755</span>	

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number: <span style="border: 1px solid black; padding: 2px;">25226</span>		<input type="checkbox"/> Correspondence address below			
<i>Name</i> <span style="border: 1px solid black; padding: 2px;"></span>					
<i>Address</i> <span style="border: 1px solid black; padding: 2px;"></span>					
<i>City</i> <span style="border: 1px solid black; padding: 2px;"></span>		<i>State</i> <span style="border: 1px solid black; padding: 2px;"></span>	<i>Zip Code</i> <span style="border: 1px solid black; padding: 2px;"></span>		<i>Telephone</i> <span style="border: 1px solid black; padding: 2px;"></span>
<i>Country</i> <span style="border: 1px solid black; padding: 2px;"></span>				<i>Fax</i> <span style="border: 1px solid black; padding: 2px;"></span>	
<i>Name (Print/Type)</i> <span style="border: 1px solid black; padding: 2px;">Jill A. Jacobson</span>		<i>Registration No. (Attorney/Agent)</i> <span style="border: 1px solid black; padding: 2px;">40,030</span>			
<i>Signature</i> <span style="border: 1px solid black; padding: 2px;"><i>Jill A. Jacobson</i></span>				<i>Date</i> <span style="border: 1px solid black; padding: 2px;">November 12, 2003</span>	

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV336627807US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 11/13/03Signature: 

(Tamara Alcaraz)

16834 10/713748



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# FEE TRANSMITTAL

## for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

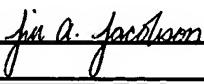
 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 770.00)

Complete if Known

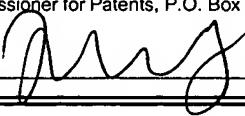
Application Number	Not Yet Assigned
Filing Date	Concurrently Herewith
First Named Inventor	Scott K. PALM
Examiner Name	Not Yet Assigned
Art Unit	Not Yet Assigned
Attorney Docket No.	221612001002

METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)				
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None	3. ADDITIONAL FEES				
<input checked="" type="checkbox"/> Deposit Account:					Large Entity	Small Entity			
Deposit Account Number	03-1952				Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
Deposit Account Name	Morrison & Foerster LLP				1051	130	2051	65	Surcharge - late filing fee or oath
The Director is authorized to: (check all that apply)					1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input checked="" type="checkbox"/> Credit any overpayments	<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)			1053	130	1053	130	Non-English specification
					1812	2,520	1812	2,520	For filing a request for ex parte reexamination
					1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
					1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action
					1251	110	2251	55	Extension for reply within first month
					1252	420	2252	210	Extension for reply within second month
					1253	950	2253	475	Extension for reply within third month
					1254	1,480	2254	740	Extension for reply within fourth month
					1255	2,010	2255	1,005	Extension for reply within fifth month
					1401	330	2401	165	Notice of Appeal
					1402	330	2402	165	Filing a brief in support of an appeal
					1403	290	2403	145	Request for oral hearing
					1451	1,510	1451	1,510	Petition to institute a public use proceeding
					1452	110	2452	55	Petition to revive - unavoidable
					1453	1,330	2453	665	Petition to revive - unintentional
					1501	1,330	2501	665	Utility issue fee (or reissue)
					1502	480	2502	240	Design issue fee
					1503	640	2503	320	Plant issue fee
					1460	130	1460	130	Petitions to the Commissioner
					1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
					1806	180	1806	180	Submission of Information Disclosure Stmt
					8021	40	8021	40	Recording each patent assignment per property (times number of properties)
					1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))
					1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))
					1801	770	2801	385	Request for Continued Examination (RCE)
					1802	900	1802	900	Request for expedited examination of a design application
					Other fee (specify)				
					*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$ 0.00)
**or number previously paid, if greater; For Reissues, see above									

SUBMITTED BY				(Complete if applicable)			
Name (Print/Type)	Jill A. Jacobson			Registration No. (Attorney/Agent)	40,030	Telephone	(650) 813-5876
Signature				Date	November 12, 2003		

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Signature: 

(Tamara Alcaraz)